



**ACPSEM**

Australasian College of Physical  
Scientists & Engineers in Medicine

## APPLICATION FOR FELLOWSHIP

### 1. Declaration

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#### Applicant

I, \_\_\_\_\_, declare that all the information provided in this application is true and accurate.

I understand that any false statement or omission may result in the rejection of my application; and that submission of this application does not guarantee acceptance.

By signing below, I certify that I have read and understood the Guidelines for Fellowship.

Full Name

Signature

Date

*Select your Membership Tier*

M.A.C.P.S.E.M

### 2. Verification of Work Experience

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A current Curriculum Vitae **MUST** be provided with this application and **be verifiable by at least one of the applicant's Referees.**

### 3. Verification of Membership Status

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This information **MUST** be filled in by the applicant and **be verified by the ACPSEM office.**

Membership Category	Period (yyyy – yyyy)	Office Use Only
		Verified



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**4. Verification of Service to ACPSEM**

College Group or Committee	Position	Period (mm/yyyy – mm/yyyy)	Office Use Only
			Verified

Page 3 of 3

If service includes membership of a Working Group, Specialty Group or Branch Executive, the candidate must include a statement about their personal contribution with their application. Please attach this statement to the end of this application form.

**5. Referees**

Candidates must have two referees who can confirm that they have a minimum of 15 years employment and are in good standing in their workplace and/or other relevant associations.

**5.1. Declaration**

The applicant must seek referees' approval before their contact details are provided to the ACPSEM.

It is in the applicant's best interest to choose two referees that they have a close working relationship with. Referees must be familiar with the applicant's work and be in a responsible or senior position.



The ACPSEM Office will contact an applicant's referees and ask them to complete the Referee Report. The application will only be considered by the Membership Committee once the two Referee Reports are returned.

The Referee Report will contain the following questions:

- For how long have you known the applicant?
- For what period have you been in a position to form an opinion of the applicant's work and in what capacity were you connected with this work?
- Do you consider the applicant to be in good standing in their workplace and/or other relevant associations and/or organisations?
- Do you have any reservation in supporting this applicant? (Specify if applicable).
- Any other comments.

## 5.2. Referee Details

### Referee 1:

<b>Name:</b>	
<b>Position:</b>	
<b>Department/Hospital/University /ACPSEM Committee:</b>	
<b>Contact Number:</b>	
<b>Email:</b>	

### Referee 2:

<b>Name:</b>	
<b>Position:</b>	
<b>Department/Hospital/University /ACPSEM Committee:</b>	
<b>Contact Number:</b>	
<b>Email:</b>	